

# *Civil Rights Compliance Staff (CRCS)*

*Train the Trainer--BESSD*

*Geneva Watts*



# Civil Rights Compliance Staff (CRCS)

586-4955

[gwatts@dhs.hawaii.gov](mailto:gwatts@dhs.hawaii.gov)



- ✓ Serves as departmental liaison for all civil rights related matters
- ✓ Investigates civil rights complaints
- ✓ Provides technical and advisory services to the department regarding standards and requirements of civil rights laws, rules and regulations
- ✓ Develops departmental policies, procedures and plans

# Train-the Trainer

## Agenda

- Identify Some Training Needs of BESSD Training and Development Staff
- Discuss Some Training Techniques and Strategies
- Share Some Information about Civil Rights, specifically **ACCESS** Issues, Laws, Rights

### **MEANINGFUL ACCESS**

- **Language Access**
- **Building/s Access**
- ✓ **Employment Access**
- ✓ **Program, Services and Activities Access**

# Trainer Needs

- On-the-Job (Coaching)
- Orientation (New employees/contractors)
- Computer Based Modules (Confirmations)
- PowerPoint Slides/DVDs (How to, Resources)
- Alternate Formats
- Training Notices
- Training Records
- Technology (**Change is Constant**)
- Resources (Home Page)
- Adult Learning Strategies
- Humor
- Practice (Scenarios)
- Follow-up

# Techniques and Strategies

- **Warm-up (Icebreakers)**
- **Introductions**
- **Focus**
- **Objective/s**
- **Content (back-up)**
- **Examples/Samples (customized)**
- **Precautions (Reading), (Timing)**
- **Practice and Questions (Park)**
- **Think (Cognitive Mapping)**
- **Act (Closure)**

# Content--Information Needs

- **Laws**
- **Guidelines**
- **Forms**
- **Issues**
- **Assurances**
- **Processes**
- **Flow/diagrams/tools (Best Practices)**
- **Closure**

# Contents

Civil Rights Training (**FNS-113**, p. 16)

- **Collection and use of data**
- Effective public notification systems
- **Complaint procedures**
- Compliance review techniques
- Resolution of noncompliance
- **Requirements for reasonable accommodation of persons with disabilities**
- **Requirements for language assistance**
- Conflict resolution, and
- Customer service



# **Civil Rights Compliance for BESSD Trainers**



**Objective: To provide relevant CRC  
information and TECHNIQUES, STRATEGIES,  
AND TOOLS FOR DELIVERING THAT  
INFORMATION**

**Aim: Create awareness**

**Discussion: Change**

# *Civil Rights Compliance*

*means ensuring that*

- ✓ *All individuals are provided the right to equal employment opportunity*
- ✓ *All clients are provided equal access to services*



# Meaningful Access

## Improving Services

- Employment
  - Programs, Services and Activities
  - Buildings
- 
- Notice/s (Signage)
  - Processes
    - ✓ Complaint Process
    - ✓ Reasonable Accommodation
    - ✓ Investigations Participation
    - ✓ Self-Evaluation

# Not



# Access???????



# Notices ???????



2007/09/29

# *Prominent Civil Rights Legislation*

- *Civil Rights Act of 1866*
- *Civil Rights Act (CRA) of 1964*
- *Age Discrimination in Employment Act (ADEA) of 1967*
- *Rehabilitation Act of 1973*  
*Americans with Disabilities Act (ADA) of 1990*
- *Civil Rights Act of 1991*
- *Hawaii Revised Statutes (HRS), § 378 and 371 (2006),  
Act 290*



# *Protected Areas in Employment*

**FEDERAL**

*Race*  
*Color*  
*National Origin*  
*Sex*  
*Religion*  
*Disability*  
*Age*  
*Uniformed Service*  
*Citizenship Status*

**STATE**

*Ancestry*  
*Marital Status*  
*Arrest and Court Record*  
*Sexual Orientation*  
*Child Support Obligations*  
*National Guard Absence*  
*Breast Feeding*

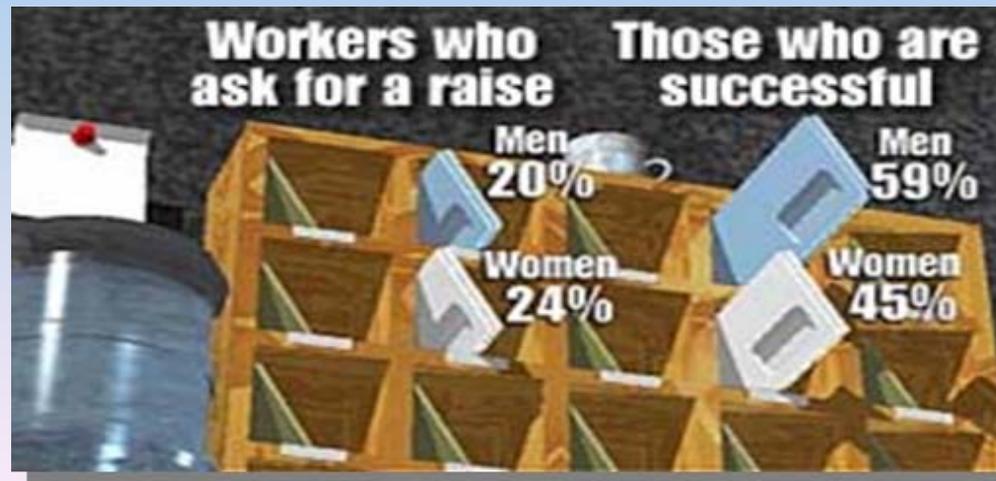
# The Age Discrimination in Employment Act (ADEA)

- Applies to employers with 20 or more employees.
- Applies to individuals who are age 40 and over.



# The Equal Pay Act (EPA)

- Prohibits sex-based wage discrimination
- Includes fringe benefits
- Applies when men and women perform substantially equal work



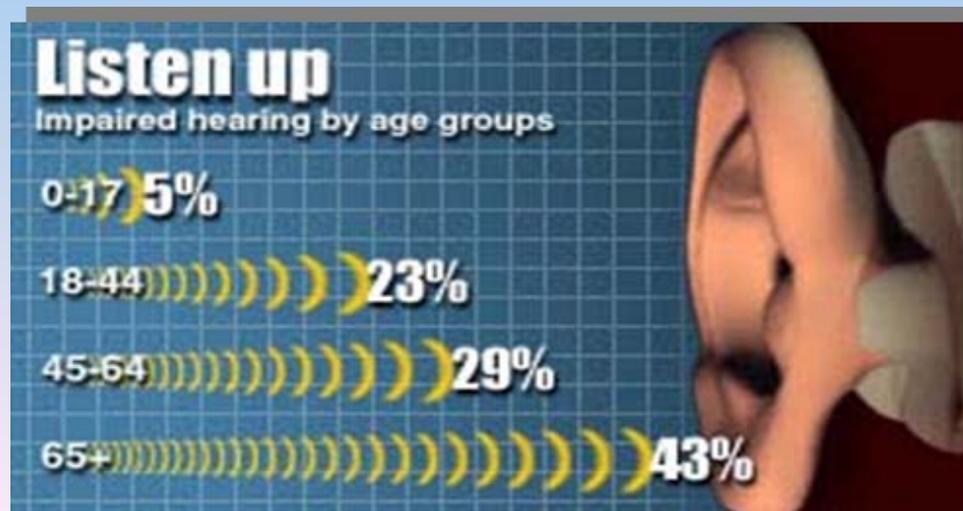
# Americans with Disabilities Act (ADA)



Reasonable Accommodation

# Title I of the Americans with Disabilities Act (ADA)

- Prohibits discrimination on the basis of disability, including the requirement to provide a reasonable accommodation to persons with physical and/or mental limitations.



# *Qualified Individual with a Disability*

- *Has a physical or mental impairment*
- *Has record of an impairment*
- *Is regarded as having an impairment*





# **REASONABLE ACCOMMODATION**



*A modification or adjustment to a job, the work environment, or the way job tasks are usually accomplished, to enable a qualified individual with a disability to perform the essential functions of a job or position.*

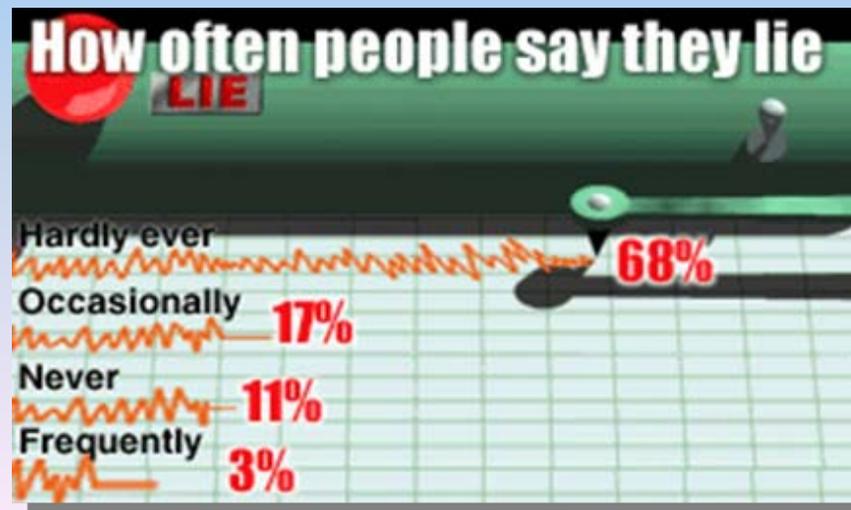
# *REASONABLE ACCOMMODATION*

- *Making facilities accessible*
- *Job restructuring, modifying work schedules, reassignment*
- *Acquiring or modifying equipment or devices*
- *Adjusting examinations, training materials, or policies*
- *Providing qualified readers or interpreters*



# Medical Records and Information--

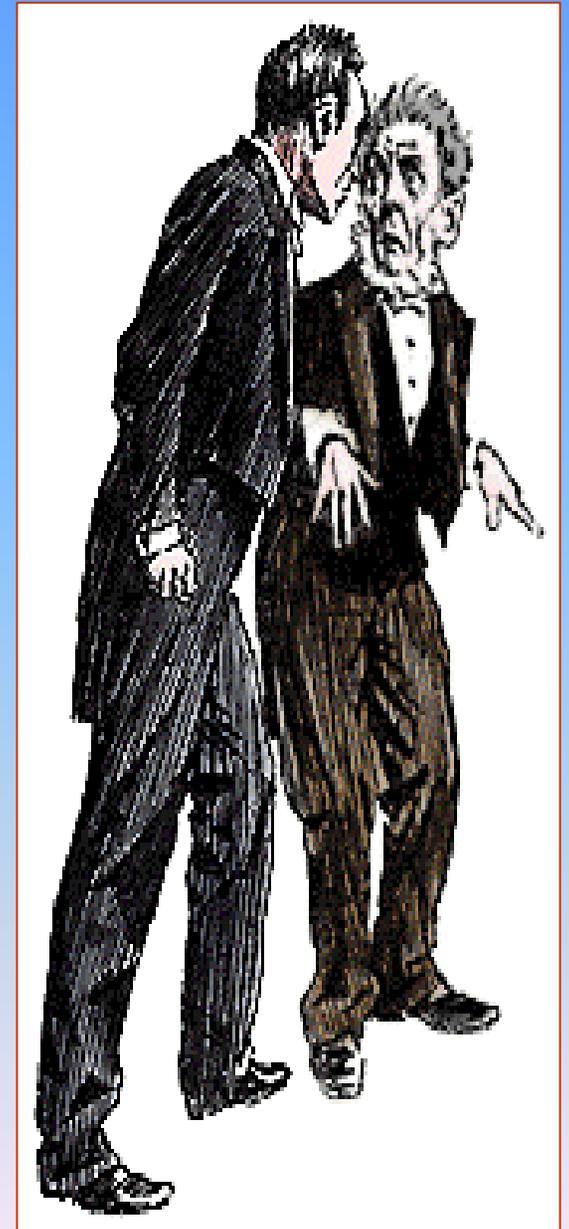
- Medical information about applicants and/or employees in a confidential medical file that is separate from the personnel, payroll and employment action in a locked file cabinet.



# Harassment

Is **UNLAWFUL** when:

- *Based on a protected factor*
- *Alters terms and conditions*
- *Creates hostile work environment*



# Identifying and Preventing Workplace Harassment



# Harassment

- Any unwelcome verbal or physical conduct based on:
  - Race
  - Color
  - Sex
  - Religion
  - National origin
  - Age
  - Disability

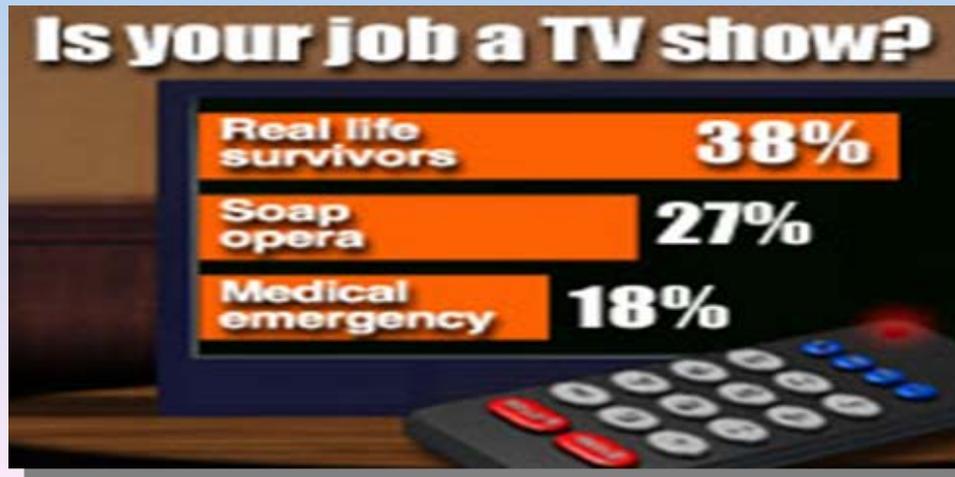


# Two Types of Harassment

## 1) **Tangible Employment Action**

❖ Only supervisors and managers can subject an employee to tangible employment action harassment because only supervisors and managers have the authority needed to take a tangible employment action.

(hiring, benefits, promotion, demotion, discharge)



# SEXUAL HARASSMENT



*Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature*

- *Quid Pro Quo – something promised in exchange for something else*
- *Hostile work environment - conduct interferes with employee's ability to perform his/her job, or creates an offensive, hostile or intimidating work environment*

# Avoiding Harassment

- Educate and Monitor
- Listen and Investigate
- Take Corrective Action



*As a supervisor you set the standard*

## 2) Hostile Work Environment

- ❖ Unwelcome comments or conduct based on race, color, sex, religion, national origin, age or disability unreasonably interferes with an employee's work performance or creates an intimidating, hostile or offensive work environment.
- ❖ **A hostile work environment can be created by a supervisor, manager, co-worker or non-employee.**
- ❖ **Includes, jokes, gestures, touching, graffiti, demeaning names or expressions, mocking behavior.**



# Retaliation is Prohibited

- It is unlawful to penalize, punish or deny employment, benefit, OR SERVICE because that person opposed discrimination or participated in any way (ex: as a witness) in the investigation of a charge.



# Recordkeeping Requirements

- Payroll, personnel and employment action records
  - Employers can SUPPORT COMPLIANCE with all of the laws by retaining all payroll, personnel and employment action records for 3 years.
  - SUPERVISORS do you have any ....

## DOCUMENTATION?



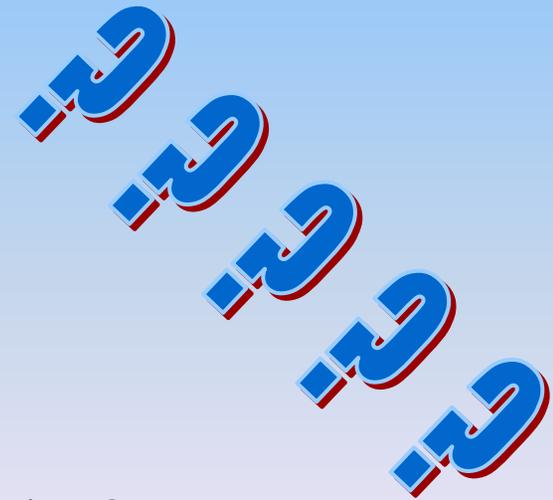
# Questions or Concerns

## **What questions do you have?**

**(about reasonable accommodation retaliation, harassment, documentation?)**

### Frequently asked questions

- \* What is reasonable accommodation?
- \* What constitutes retaliation?
- \* How do I stop the harassment or bullying?
- \* What is considered misconduct at DHS?
- \* What do I need to document?
- \* Why do I have to be subjected to these behaviors?



# DHS

## Policies and Procedures



*Non-Discrimination in Employment and Services*

*Discrimination Complaint Procedure (4.10.1)*

*Harassment (4.10.2)*

*Opportunity to Participate in Programs, Services and Activities  
(4.10.3)*

# Participation in Investigations

- **Internal**
  - Branch/Division
  - Departmental
- **External**
  - Hawaii Civil Rights Commission (HCRC)
  - EEOC
  - HHS
  - USDA/FNS
  - US Justice Department



# What is the truth?

Fact

Reality

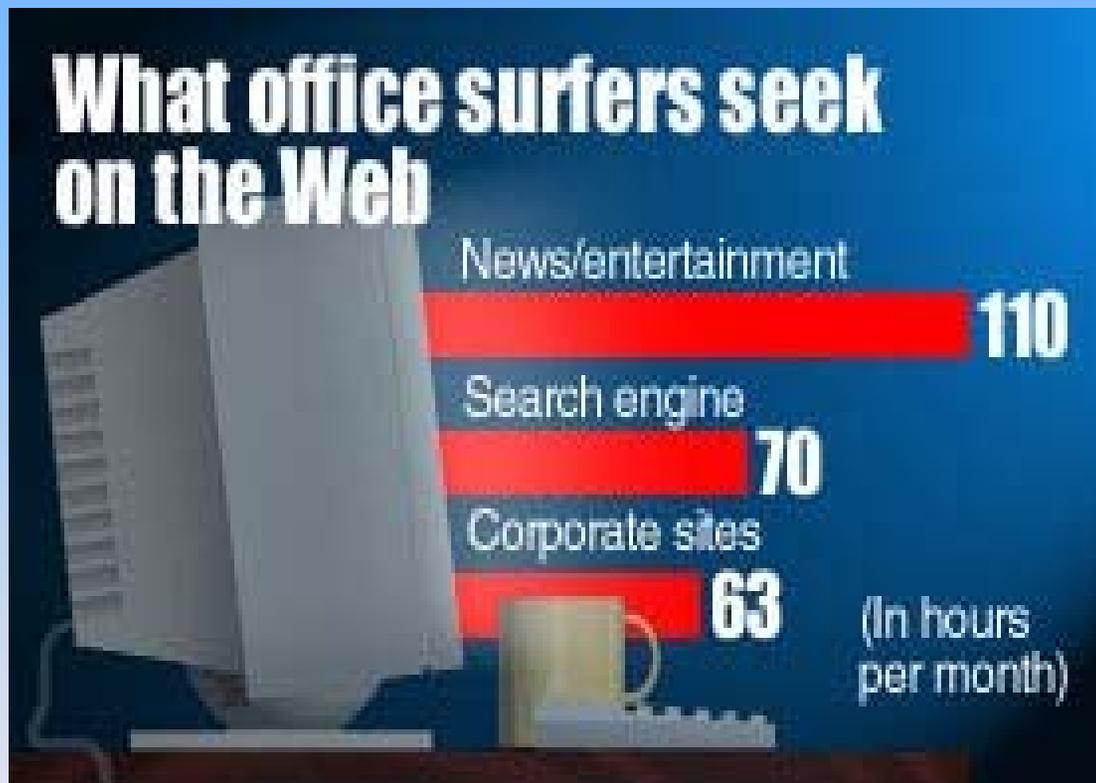
Perception

Analysis

Findings

Conclusions

Action



# Rights and Responsibilities

- Supervisors' Rights
- Employee Rights
- Everybody's Rights
  
- Supervisors' Responsibilities
- Employee Responsibilities
- Everybody's Responsibilities



***Opportunity  
to Participate in Programs,  
Services, and Activities***



# *Protected Areas in Access to Services*

**FEDERAL**

*National Origin*

*Political Beliefs \**

*Race*

*Color*

*Sex*

*Religion \**

*Disability*

*Age*

*Ancestry*

*Breast Feeding*

**STATE**



*\* Applies only to Food Stamp Program applicants and recipients*

# *Access Requirements*

*Applicants, clients and program participants should be informed of their right to:*

- *Non-discriminatory service provision*
- *Accommodation*
- *Free sign or other language interpreters*
- *File a complaint*



# Summary of Problem

- While English is the predominant language in the United States, over 32 million people in the country have Limited English Proficiency.
- L E P Individuals face many barriers to critical health and social services.
- We need to remove the barriers!



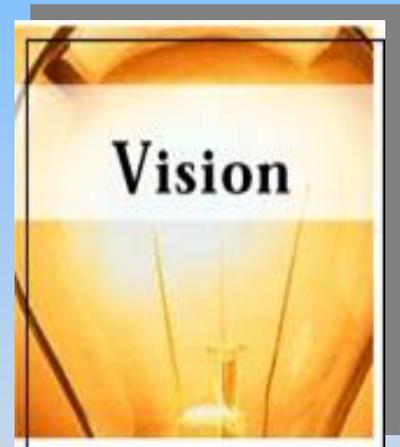
## Example

**The U. S. Department of Health and Human Services found that frequently LEP persons are unable to obtain basic knowledge of how to access benefits and services for which they are eligible.**

**Such benefits and services include and are not limited to: Food Stamps, Medicare, Medicaid, TANF (Temporary Assistance to Needy Families), SCHIP (State Children's Health Insurance Program), and others.**

# Goals

- Prevent National Origin Discrimination
- Take affirmative steps to ensure that individuals with language needs understand their rights and our services
- Enhance communication by providing specific interpreter and translation services free of charge to individuals who need it

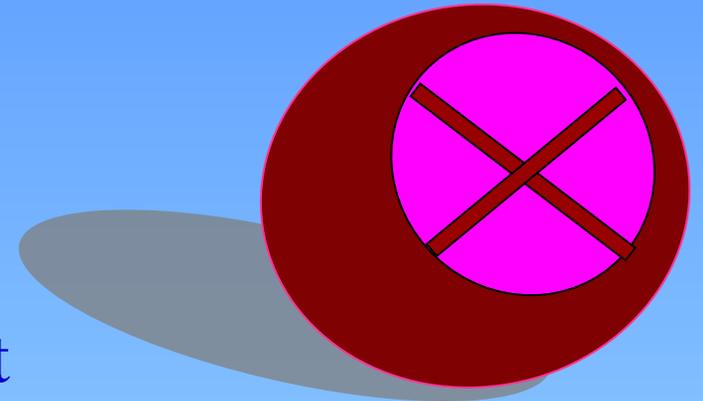


# Opportunities



- We have an opportunity to ensure that we provide LEP individuals with meaningful access to DHS programs and services
- As a recipient of Federal funds we are prohibited from discriminating against clients, applicants, potential applicants and employees based on national origin as it affects persons with LEP.
- We at DHS have an opportunity and obligation to provide services that are free from discriminatory practices.

# Federal Law



- Title VI of the Civil Rights Act

Excerpt: ...may not directly or through contractual or other arrangements because of...national origin:

-Deny an individual any service, financial aid, or other benefit provided by a program,

-Use criteria or methods of administration which have the effect of subjecting individuals to discrimination or have the effect of defeating or substantially impairing accomplishment of objectives of a program.

# Assurances

Applicant assures and certifies that:

**It will comply and assure the compliance of all its **SUBGRANTEES AND CONTRACTORS....****

It will comply, and its contractors will comply, with nondiscrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968 (and other Federal and State civil rights statutes and regulations).

**In the event a Federal or State court or administrative agency makes a finding of discrimination AFTER A DUE PROCESS HEARING ON THE GROUND OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX OR DISABILITY against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, Office of Justice Programs.**

It will provide an Equal Employment Opportunity Program if required to maintain one, where the application is for \$500,000 or more.

# State Statute

- Hawaii Revised Statutes, Title 21  
Labor and Industrial Relations  
Chapter 371, Part II 371-31 to 37  
Act 290 Effective July 10, 2006
- **Language Access**
  - **Points to Remember**
  - **Revised Statute**



# Language Access

## Points

### Points to Remember (State Law 290, Rev. 2006)

- Applies to all State public contact activities
  - Limited English Proficiency (LEP) individuals are entitled to same level of access as those who speak English
- Self-identified LEP**
- Ensure competent, timely, free interpreter services
  - Use four-factor analysis to determine needs for written translation
  - Develop a Language Access Plan
  - Established State level Office of Language Access (DOLIR)
  - Eleven-person language Access Advisory Council

# DHS Policy and Procedures



- **DHS Policy and Procedure 4.10.3 Opportunity to Access Programs, Services and Activities (Revised 2007)**
- Our policy says that we will provide, free of charge, language interpreters for applicants and clients who have limited English proficiency.

(Please see **SEPTEMBER** 2007 Interpreter List also.)

# Can Do:



- Ensure that LEP persons are:
  - Given adequate and correct information
  - Understanding of what services and benefits are available
  - Effectively communicating relevant circumstances of their situation
- Provide a comprehensive language assistance program, written policies, interpreter and/or translation services and effective communication devices.

# Interpreter Requirements

- Proficient in more than one language
- Avoid using friends, family, minor children
- Document client declination
- Arrange before bringing client in
- Use DHS volunteers appropriately
- Examine credentials, including certification, of interpreters



# Complaint Process



- Right to file complaint concurrently
- **Must be informed of complaint process in writing**
- Forms, brochures, posters in multiple languages
- Guidelines should be clear
- Procedures, processes and forms readily available

# Resources

- Technology

- Audio, video, tel-video phones
- Live on-line; web casts

- Personnel

- Face-to-face interaction required
- Verbal-written

- Aids

- Recorder, transcriber, voice recognition
- American Sign Language
- Multiple language forms/brochures
- Large print (nothing smaller than 12 pt)

- External

- Bi-lingual Access Line
- Language Department (Colleges and Universities)
- Charities



# Additional Resources

## Who you gonna call?

- **Bi-lingual Access Line**
- **Languages Unlimited**  
<http://www.languagesunlimited.com>  
[language60@aol.com](mailto:language60@aol.com)
- **FreeTranslation.com**     <http://ets.freetranslation.com>
- **Alameda County Telelanguage, Inc.**
- **American Telesource, Inc.**     [Cmetinko@cctimes.com](mailto:Cmetinko@cctimes.com)
- <http://www.justcommunication.co.uk> (deaf communication)
- **Pacific Gateway**

# Summary

- Inform LEP individuals of their right to free interpreter services
- Avoid advising LEP individuals to bring a friend or family member to interpret
- Contact one or more interpreter services (phone, e-mail, on-line, in-person)
- Use DHS Volunteer Interpreters as appropriate and needed
- Provide information on process for filing a complaint when service delivery is unacceptable

# Contacts

➤ **Geneva Watts, DHS, CRCS,  
P. O. Box 339  
Honolulu, HI 96809-0339**

**(808) 586-4955**

**TTY (808) 586-4959**

➤ **USDA  
Director, Office of Civil Rights  
1400 Independence Avenue, S.W.  
Washington, D. C. 20250-9410**

**(800) 795-3272**

**TTY (202) 720-6382**

➤ **U.S. Department of Health and Human Services  
Director, Office of Civil Rights, Room 506-F  
200 Independence Avenue, S.W.  
Washington, D. C. 20201**

**(202) 619-0403**

**TTY (202) 619-3257**

➤ **U. S. Department of Education  
Office of Civil Rights, Seattle Office  
915 Second Avenue, Room 3310  
Seattle, WA 98174-1099**

**(206) 220-7900**

**Fax (206) 220 7887**

➤ **U. S. Department of Justice  
Office of Civil Rights  
810 7<sup>th</sup> Street, NW  
Washington, D. C. 20531**

**(202) 307-0690**

➤ **Hawaii Civil Rights Commission  
830 Punchbowl Street, Room 411  
Honolulu, Hi 96809**

**(808) 586-8636**



# Frequently Asked Questions



? ? ? ? ? ? ? ? ? ? ?

- **Where can I find an American Sign Language Interpreter?**
- **What is the hourly rate for interpreters?**
- **Can we cover travel expenses?**
- **Do interpreters need to be certified? If so, By whom?**
- **Can we contact the courts for interpreters?**
- **Why can't an applicant bring a family member?**

# Questions



- What questions do you have?
- What specific actions will you take as a result of this knowledge?

**Please think and act.**

- What, if any, additional training and/or information do you need?

# Please lend a hand!

Together we can prevent and/or eliminate discriminatory practices in employment and in meeting service needs of clients, applicants and potential applicants.



**Geneva Watts**

**[gwatts@dhs.hawaii.gov](mailto:gwatts@dhs.hawaii.gov)**



**DHS, Civil Rights Compliance Staff**

**Phone (808) 586-4955**

**TTY (808) 586-4959**

# Icebreaker



**Naa kay higayon nga dili  
motambong niining klase  
kung makasabot ka sa  
pinulongang Bisaya.  
Pahiyom aron ipakita nga  
nakasabot ka niining pinulongan**



# Icebreaker:

What you needed to do to win & what you would have won!

**You may have a chance to be  
excused from attending  
this workshop  
if you can understand  
the Visayan language.  
Smile to show you understand  
this language.**



你好

• Kumusta • Chào • Talofa •

नमस्ते

Malo e lelei • Hola • Ciao • Bula • Kaselehlia

Ia ora na • Aloha • Iakwe • 안녕하세요

Mingala ba • Sabaidee • Hafa • Ran allim

# State Statute

- Hawaii Revised Statutes, Title 21  
Labor and Industrial Relations  
Chapter 371, Part II 371-31 to 37  
Act 290 Effective July 10, 2006
- **Language Access**
  - **Points to Remember**
  - **Revised Statute**



# Language Access

## Points

### Points to Remember (State Law 290, Rev. 2006)

- Applies to all State public contact activities
  - Limited English Proficiency (LEP) individuals are entitled to same level of access as those who speak English
- Self-identified LEP**
- Ensure competent, timely, free interpreter services
  - Use four-factor analysis to determine needs for written translation
  - Develop a Language Access Plan
  - Established State level Office of Language Access (DOLIR)
  - Eleven-person language Access Advisory Council

# Glossary of Acronyms

You will hear the following terms:

- **OLA** → Office of Language Access
- **LEP** → Limited English Proficient
- **LA Plan** → Language Access Plan  
(“Plan for Language Access”)

# Hawai'i's Language Access Law

- Act 290 Relating to Language Access (2006 Haw. Sess. L. Act 290)
- Codified in HRS §§ 371-31 to 371-37 (provided in handout)

- <http://hawaii.gov/labor/ola/law.shtml>

# Purpose of Hawai'i's Law

- State of Hawai'i understands that language is a barrier to accessing and participating in services (HRS § 371-31)

## Del Monte Workers



**Del Monte would cease in Dec. 2008**  
**Nov. 2006 – Del Monte closed & workers laid off**  
**Workers had a right to unemployment benefits.**  
**How were LEP Del Monte workers helped?**

# CUSTOMER SERVICE

## Purpose

- **State of Hawai'i understands that language is a barrier to accessing and participating in services (HRS § 371-31).**
- **Hawai'i ranks 4th in the nation with 17.9% of the population being foreign born (2000 Census).**
- **Hawaiian is an official language of the State.**
- **Complies with Federal requirements.**

# Who must Comply with the Law?

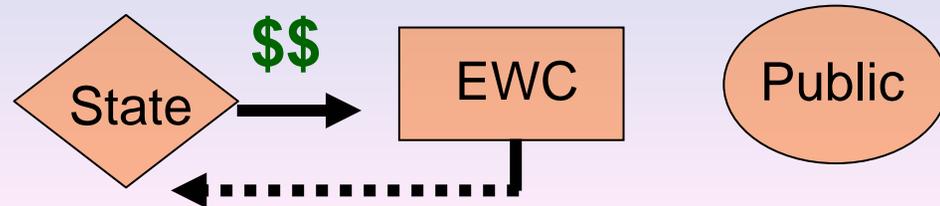
- The “State”
  - Executive,
  - Legislative
  - Judicial,
  - & departments, offices, commissions, boards or other agencies
- “Covered Entities”
  - State funding
  - “rendering services on behalf of the State”

# Covered Entities

- State funding
  - Grants
  - Purchase-of-service contracts
  - Any other arrangement
    - **NOT:**
      - Procurement contracts,
      - State insurance or guaranty contracts,
      - Licenses,
      - Tax Credit, or
      - Loan Guarantees to private business



- “Rendering services on behalf of the State”
  - Services to the public
  - Example: East-West Center



# State or Covered Entity

**Am I the State?**

Executive? **Yes**

**No**

Legislative? **Yes**

**No**

Judicial? **Yes**

**No**

Dept., Offices,  
Commissions,

boards within  
the branches?

**Yes**

**No**

.....>

**Check if Covered Entity**

**Am I a "Covered Entity"?**

State funding? **No**

**Yes**

Services to Public  
on behalf of State?

**Yes**

**No**

Not required  
(note:  
Federal)

Must  
Comply

# Who does the law protect?

- LEP persons
  - Primary language is NOT English
  - Self-identifies
  - Limited ability to (all, one or some):
    - Read
    - Write
    - Speak
    - Understand

# Meaningful Access

- “Meaningful Access” means LEP persons are:
  - Informed of;
  - Able to participate in; and
  - Benefit from  
the services, programs, and activities  
offered by the State & covered entities.

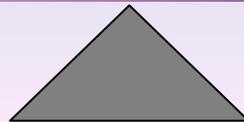
# Guidelines & Factors

for taking reasonable steps to provide meaningful access

- “Reasonable Steps” Test:
- Fact-dependent, Balancing test
- Totality of the circumstances, including the following factors:
  - Number
  - Frequency
  - Nature and importance
  - Resources

Reasonable  
Provide

Not Reasonable  
Not Provide



# “Reasonable Steps”

- The **frequency** with which LEP persons come in contact with the services, programs, or activities
  - Points of contact & Information accessed
  - Greater frequency = Greater duty
  - Frequency of various languages

# Language Services

Meaningful Access - Informed, participate in, benefit from

- Interpreter (Oral)
- Translator (Written)
- Notice of Oral Interpretation
- Bilingual Employee (not automatic)
- Informal Interpreters
  - Ethical considerations
  - Use of formal too



# Is it “reasonable” to provide oral language services?



**Number:** ~ 165 (~150 in one day)

**Frequency:** ~ 165 x 2 times, 3 languages

**Nature & importance:** need & entitled to benefits

**Resources:** DLIR had 4 bilingual employees who could provide language services

Is it “reasonable”  
to provide oral language services?



**Number: 1**

**Frequency: 1**

**Nature & importance: need & entitled to benefits**

**Resources: Telephone Interpreter Service**

# Written Translation

## Requirements

- Law requires “Vital Documents” be translated if reasonable and provides meaningful access.
- Must go through “Reasonable Steps” test



# Written Translation

## Requirements

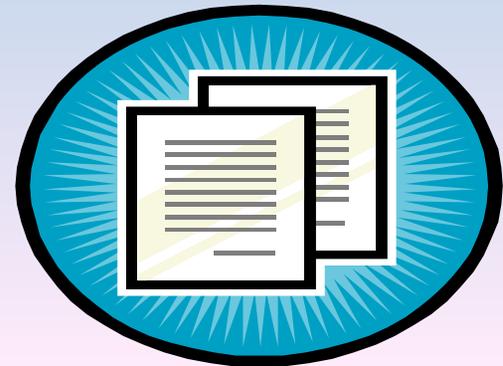
- Vital Documents:
  - Printed documents that provide important information necessary to participate in services, programs or activities.
  - Includes, but is not limited to:
    - Applications,
    - Outreach Materials, and
    - Written notices of rights, denials, losses or decreases in benefits or services



# Written Notice for Oral Translation

for LEP groups of 5% but < 50

- Procedure for providing oral language services for LEP Groups that meet the 5% threshold but number less than 50.
  - List of languages or plan on how to get data
  - Samples of written notice



# Data Collection & Reporting System

to determine reasonable steps to ensure meaningful access

- Enact a data collection system to obtain info on the LEP populations (number & frequency)
  - **services they access or**
  - **would access if your services were linguistically accessible**
  - Type of service provided (oral or written)
  - Nature and number of complaints, if any



# Data Collection & Reporting System

to determine reasonable steps to ensure meaningful access

## Interpretation and Translation Services Log

For the Month Ending \_\_\_\_\_

| <b>Date</b> | <b>Translation Service Used</b>   | <b>Start Time</b> | <b>End Time</b> | <b>Phone # or Office</b> | <b>Language</b> | <b>Comments from LEP clients or their representative(s) regarding quality of services provided:</b>  |
|-------------|-----------------------------------|-------------------|-----------------|--------------------------|-----------------|--|
| 07/07/2007  | Employee                          | 10:30 a           | 11:15 a         | 555-1256                 | Ilokano         | None.  |
| 07/07/2007  | Translations R Us (Sample Agency) | 11:45 a           | 12:30 p         | Benefits Division        | Chuukese        | Client's representative stated that interpreter was not translating the entire conversation and but for representatives presence, client would not know exactly what was going on. |
| 07/08/2007  | Language Line                     | 8:00 a            | 9:06 a          | 555-6859                 | Korean          | None.  |

# Data Collection & Reporting System

to determine reasonable steps to ensure meaningful access

## Limited English Proficiency Questionnaire

This questionnaire is to be completed by Staff providing services to an individual with limited English proficiency. Please complete the questionnaire for each LEP individual served and turn in to LEP Coordinator.

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_

Division/Office: \_\_\_\_\_

Name of LEP Individual (If known): \_\_\_\_\_

1. What is the primary language spoken by the LEP person?  
(Burmese, Cambodian, Chamorro, Chuukese, Ilokano, Japanese, Korean, Kosraean, Lao, Mandarin.)
2. List the type of services provided this person.  
(e.g. applications, permits, license, services, job information, benefits)
3. Was the service provided within the timeframe as services provided to non-LEP individuals?  
(Yes or No; if No, please indicate why)

# Evaluation Process

- Describe a process to determine if the goal to provide meaningful access was met.
- Include a process for review, revision, and submission of a plan to OLA every two years.
- Feedback from community & stakeholders



# Training for Staff

- Describe:
  - How will you ensure your employees understand the LA Plan; and
  - Who will do the training.
  
- Note:
  - Language Access Council will be reviewing training of employees.
  - OLA can provide technical assistance on training.



# Implementation of Plan & Next Steps

- Implement LA Plan that complies law
- Begin:
  - Gathering Statistics
  - Training employees about LA Plan
  - Creating taskforces, or internal investigation committees
- OLA will monitor progress & provide technical assistance

# OLA's Role in Ensuring Compliance with the Law

- LEP Customers file complaint with OLA
- OLA will use informal compliance methods to resolve barriers to reasonable access HRS § 371-36(4)
- Executive Director of the OLA mandated to report to the Legislature, the progress and non-compliance of agencies.
- Note: Federal Requirements

# Deadlines

- State
  - required to submit plan
  - no later than July 1, 2007
  - and every 2 years thereafter.
- Covered Entities
  - required to establish a plan.
- OLA's internal deadline:
  - State & Covered Entities December 31, 2007 for revision.

# Agencies in Compliance

- **Department of Accounting & General Services**
- **Department of Agriculture**
- **Department of the Attorney General**
- **Department of Business, Economic Development & Tourism**
- **Department of Defense**
- **Department of Education**
- **Department of Hawaiian Homelands**
- **Department of Human Services**
- **Department of Labor & Industrial Relations**
- **Department of Land & Natural Resources**
- **Department of Public Safety**
- **Department of Transportation**
- **Hawaii State Public Library System**
- **Judiciary**

# IF YOU NEED AN INTERPRETER . . .

We provide interpreter services on request to conduct your business with this office.

If you need an interpreter in a particular language, point to that language below:

-  မြန်မာဘာသာပြန်ဝန်ထမ်း ဤနေရာကိုခိုက်ညွှန်ပါ။ Burmese
-  ဗမ္ဘော့ဇိးစီးပွားရေးဌာနကူညီပေးပါ။ Cambodian
-  E punto guene unnesesita intepete ni esta na lenguahe. Chamorro
-  Itini ikei ika pun ke osupwangen emon chon chiaku non kapasen ei neni ika fonu. Chuukese
-  Inā pono he mahele 'ōlelo Hawai'i iā 'oe, e kuhikuhi mai iā 'ane'i nei. Hawaiian
-  Itudom ditoy no masapol mo ti interpreter ti sarita nga Ilocano. Ilocano
-  お話しになる言語を指して下さい。 Japanese
-  여러분이 이언어를 이해하시고 사용하시면 이곳을 가르키십시오 저희가 통역을 제공하겠습니다 Korean
-  Kom fin nikin, kom enenu in oasr met leng kaks lom. Kosraen
-  ຖ້າທ່ານເວົ້າແລະເຂົ້າໃຈພາສາມື້, ໃຫ້ຊີ້ເສັ້ນນີ້. ນາຍພາສາຈະຊ່ວຍທ່ານ Lao
-  如果您明白此種語言，請指向本文。我們會提供該種語言翻譯員。 Mandarin or Cantonese
-  Jitoñe ñe eloñ am ñoñ rikook kajin. Marshallese
-  Idih wasabt ma ke anahne soun kawehwe ni lokaia wel. Pohnpeian
-  Afai e te mana'omia le faaliliu upu ile gagana Samoa faailoa mai faamolemole. Samoaan
-  Apunte aqui si necesita un traductor en Español. Spanish
-  Ituro dito kung nanganga-ilangan ka ng tagapagsalin sa ganitong wika. Tagalog
-  กรุงเทพมหานครนี้ถาองการผุขายแปลภาษา Thai
-  Tuhu ki he tohi ni Kapau'oku Fie. ma'u ha Tokoni ke Fakamatata atu 'ae 'uhinga Tongan 'oe ton. Tongan
-  Chi vao dây nêu ban cân một thông dịch viên cho ngôn ngữ Vietnam. Vietnamese
-  Itudlo diri kung nanginahanglan ka ug taghubad niining pinulongan. Visayan (Cebuano) Visayan (Cebuano)
-  Mu guchum ngarag ni faamra gabadag ninge thilyeg bee e thin rom. Yapese



Interpretation services may be provided at no charge in accordance with Chapter 371-33, Hawaii Revised Statutes.  
 For more information about Hawaii's Language Access Law - Chapter 371, HRS (Part II), please visit [www.hawaii.gov/labor/ola](http://www.hawaii.gov/labor/ola) or call the Office of Language Access at (808) 586-8750.  
 State of Hawaii  
 Linda Lingic, Governor

**VIETNAMESE:** Bộ Canh Nông Hoa Kỳ (U.S. Department of Agriculture) (USDA) cấm chỉ các hình thức kỳ thị trong tất cả các chương trình và hoạt động của Bộ dựa trên các căn bản về chủng tộc, màu da, nguồn gốc, phái tính, tôn giáo, tuổi tác, tình trạng tàn phế, khuyến hướng chính trị, khuyến hướng tình dục và tình trạng gia đình. (Có một số căn bản không được áp dụng cho tất cả mọi chương trình). Những người bị tàn phế cần có phương tiện thông tin thích hợp khác để được biết về các chi tiết của chương trình (như là chữ Braille, chữ in lớn, băng thâu âm, v.v.) cần liên lạc với trung tâm TARGET của USDA tại số điện thoại (202) 720-2600 (điện thoại thường và điện thoại dành cho người yếu thính giác).

Muốn nộp đơn khiếu nại vì bị kỳ thị, xin quý vị gửi đơn về tới USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 hoặc gọi về số điện thoại (202) 720-5964 (điện thoại thường và điện thoại dành cho người yếu thính giác). USDA là một cơ quan cung cấp các cơ hội đồng đều và công ăn việc làm và đồng thời cũng thuê muốn nhân viên trên căn bản đó.

\*\*\*\*\*

**CHINESE:** 美國農業部 (USDA) 禁止其所有計劃和活動有任何因種族、膚色、國籍、性別、宗教、年齡、殘障、政治信仰、性別和婚姻或家庭狀況的歧視行為。(非所有禁止基礎適用於所有單位)。需要任一溝通殘障人士的資料時(點字、放大字體、錄音帶, 等等)請與美國農業部 (USDA) 的目標 (TARGET) 中心聯絡, 電話 (202) 720-2600 (語音和 TDD)。

若需抗議歧視行為, 請致函 USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 或打電話至 (202) 720-5964 (語音和 TDD)。美國農業部是一個機會平等的單位與雇主。

\*\*\*\*\*

**KOREAN:** 미국 농무부(USDA)는 자체의 모든 프로그램 및 농무 활동에 있어 인종, 피부색, 출신국, 성별, 종교, 연령, 신체장애, 정치적 신조, 성적 편향, 그리고 결혼 또는 가족 상황에 근거한 차별을 금지합니다. (차별을 금지하는 모든 근거가 모든 프로그램에 적용되는 것은 아님.) 프로그램 정보의 의사 소통상 대체 수단(점자, 대형 활자, 오디오 테이프 등)을 요하는 신체장애를 가진 사람은 미국 농무성 타겟(TARGET) 센터 전화 (202)720-2600(음성 및 TDD용)으로 연락하셔야 합니다.

차별 대우에 대한 진정을 하시려면 주소 Room 326-W, Whitten Building, 14th and Independence Ave., SW, Washington, DC 20250-9410으로 서면 접수시키거나, 전화 (202)720-5964(음성 및 TDD용)에 연락하시면 됩니다. 미국 농무부는 균등한 기회를 제공하는 고용주입니다.

## Reactions

- I will **use** this material to: \_\_\_\_\_
- I need more **specific** material on how to: \_\_\_\_\_

## Actions

- ✓ I will take the following specific follow-up actions relative to this information:

\_\_\_\_\_

- ✓ I need additional information on the following:

\_\_\_\_\_

in order to \_\_\_\_\_

Please contact me at: \_\_\_\_\_

CONFIRMATION

I, \_\_\_\_\_, have participated in an information session and reviewed and understand materials relative to Civil Rights provisions, including and not limited to Limited English Proficiency (LEP) language access and disability access. I understand what procedures and process to follow when encountering individuals who self-identify as requiring language access services, including and not limited to, oral interpreter services, written translations, ASL interpretations, large print and/or other aids for seeing and hearing impaired individuals, or any other assistive devices that might be needed by persons with self-identified disabilities. I have reviewed and understand DHS' Discrimination Complaint Process and can explain it to individuals who express an interest in filing a complaint based on discriminatory factors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**or**

I, \_\_\_\_\_, have reviewed the materials and have the following specific questions.

I can be reached at: \_\_\_\_\_ or \_\_\_\_\_  
E-mail Phone

Question #1:

Question #2:

Question #3:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please complete, review, sign, date and return electronically to: \_\_\_\_\_ within 15 working days.

**Self-Identification Reporting**

Date \_\_\_\_\_

Gender  F  M

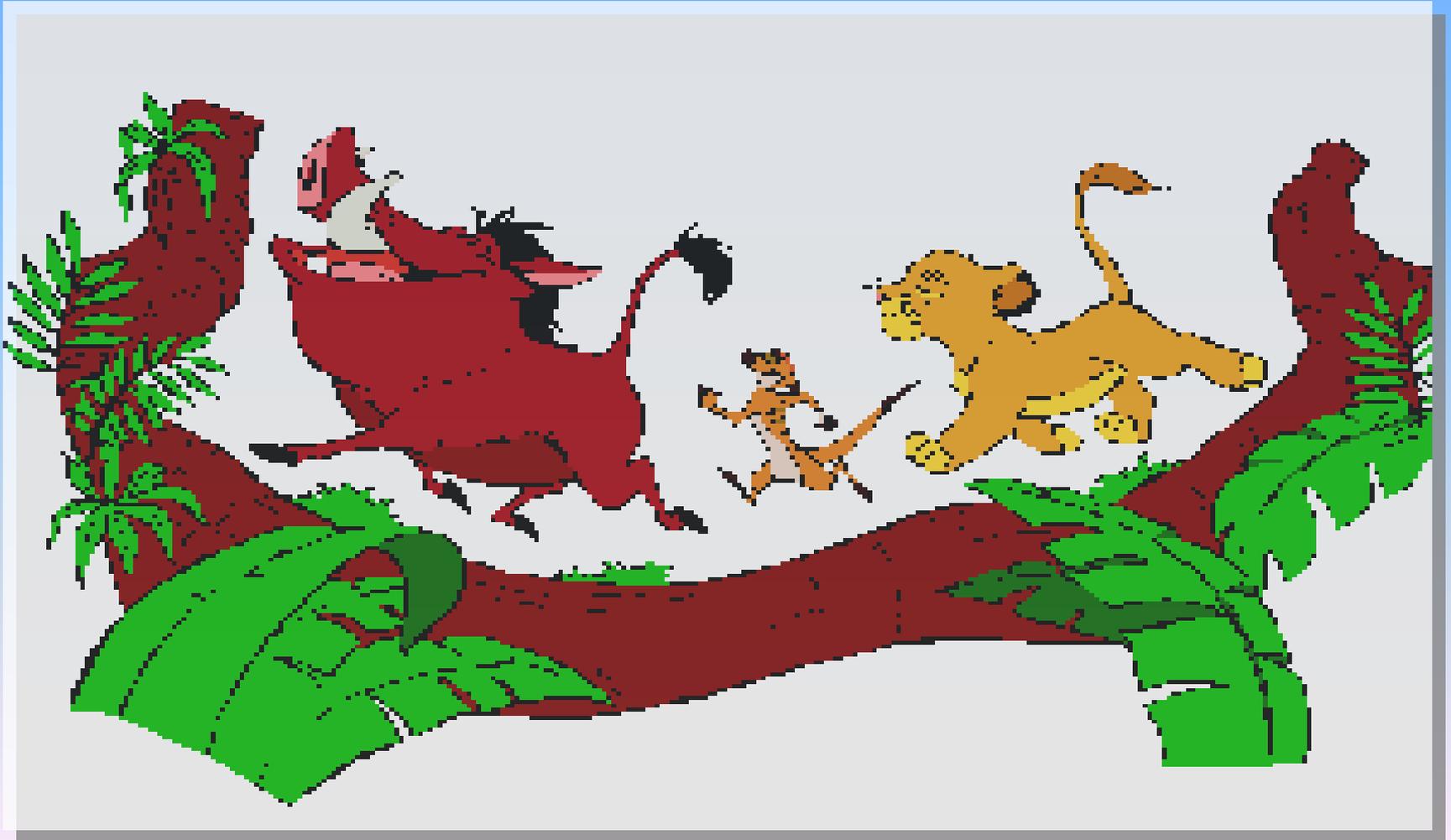
The Department of Human Services' (DHS) is committed to creating an environment that is free of discriminatory practices. Civil Rights responsibility is a shared responsibility among supervisors, employees, clients and applicants for employment and services. These responsibilities require periodic reports by race/ethnicity, national origin, gender, disability and status as a veteran. The information is used for statistical purposes only and is voluntary. The information is kept confidential and will not be used in any way to evaluate you.

1. Are you American Indian or Alaska Native?  Yes  No  
(A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.)
2. Are you Asian?  Yes  No  
(A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
3. Are you Black or African American?  Yes  No  
(A person having origins in any of the black racial groups of Africa.)
4. Are you Hispanic or Latino?  Yes  No  
(A person of Cuban, Mexican, Puerto Rican, South or Central American, other Spanish culture or origin, regardless of race.)
5. Are you Native Hawaiian or Other Pacific Islander?  Yes  No  
(A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands excluding Philippine Islands.)
6. Are you White (Caucasian)?  Yes  No  
(A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)
7. Are you more than one race?  No  Yes, Please specify \_\_\_\_\_
8. Are you some other race?  No  Yes, Please specify \_\_\_\_\_
9. What is your place of birth? \_\_\_\_\_  

|      |       |          |         |
|------|-------|----------|---------|
| City | State | Province | Country |
|------|-------|----------|---------|
10. What is your PRIMARY language spoken at home? \_\_\_\_\_
11. What is your SECONDARY language spoken at home? \_\_\_\_\_
12. What additional languages, if any, do you speak fluently? \_\_\_\_\_
13. What additional languages, if any, can you provide written translation? \_\_\_\_\_
14. Do you know how to sign in ASL?  Yes  No Other?  No  Yes\*,  
\*Please Specify \_\_\_\_\_
15. Are you a  Disabled Veteran,  Disabled Individual (non-Veteran),  Neither?
16. If there are duties you cannot perform because of a physical or mental disability, please describe on a separate sheet, mark it confidential, and send to PERS/CRCS.

**THANK YOU** If you wish to volunteer interpreter or translation services in one or more languages, please e-mail [gwatts@dhs.hawaii.gov](mailto:gwatts@dhs.hawaii.gov) or fill in the **Volunteer Interpreter Form.**

... BE PARTNERS





***THANK  
YOU***



2023/08/23